



Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Title:: METHOD OF TRACKING AND DISPENSING
MEDICAL ITEMS
Attorney Docket Number:: D-1137
Request for Early Publication?:: No
Request for Non-Publication?:: YES
Suggested Drawing Figure:: 68
Total Drawing Sheets:: 105
Small Entity:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Inventor Information

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: R.
Middle Name:: Michael
Family Name:: McGrady
Name Suffix::
City of Residence:: Baden
State or Prov. Of Residence:: PA
Country of Residence:: US
Street:: 218 Woodcroft Road
City:: Baden
State or Province:: PA
Country:: US
Postal or Zip Code:: 15005

Inventor Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Kevin
 Middle Name::
 Family Name:: Mowry
 Name Suffix::
City of Residence:: Level Green
State or Prov. Of Residence:: PA
Country of Residence:: US
Street:: 601 Cherry Drive
City:: Level Green
State or Province:: PA
Country:: US
Postal or Zip Code:: 15085

Inventor Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Maria
 Middle Name::
 Family Name:: Robinson
 Name Suffix::
City of Residence:: Wexford
State or Prov. Of Residence:: PA
Country of Residence:: US
Street:: 2524 Brandt School Road
City:: Wexford
State or Province:: PA
Country:: US
Postal or Zip Code:: 15090

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Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Linda
Middle Name::
Family Name:: Dean
Name Suffix::
City of Residence:: Cranberry Township
State or Prov. Of Residence:: PA
Country of Residence:: US
Street:: 77 Monmouth Drive
City:: Cranberry Township
State or Province:: PA
Country:: US
Postal or Zip Code:: 16066

Correspondence Information

Correspondence Customer Number:: 28995
Name:: Ralph E. Jocke
Street:: 231 South Broadway
City:: Medina
State or Province:: OH
Country:: US
Postal or Zip Code:: 44256
Phone Number:: (330) 721-0000
Fax Number:: (330) 722-6446

Representative Information

Representative Customer Number:: 28995
Designation:: Registration Number:: Name::
Primary 31,029 Ralph E. Jocke

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/202,508	5/5/2000

Assignee Information

Assignee Name:: Diebold, Incorporated